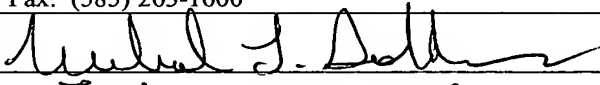
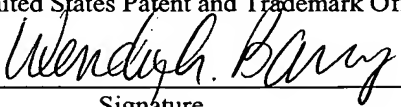


#3

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/519,370 ✓
		Filing Date	July 2, 2003
		First Named Inventor	Hanauske-Abel et al.
		Group Art Unit	To Be Assigned
		Examiner Name	To Be Assigned
Total Number of Pages in This Submission	7	Attorney Docket Number	57768/31

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply (\$_____) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request (\$_____) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement (\$_____) <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Notification of Missing Requirements Under 35 U.S.C. 371 (\$_____) <input checked="" type="checkbox"/> A copy of the Notification of Missing Requirements Under 35 U.S.C. 371	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input checked="" type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition (\$_____) <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer (\$_____) <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (\$_____) (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input checked="" type="checkbox"/> A self-addressed, prepaid postcard for acknowledging receipt <input type="checkbox"/> Check in the amount of \$_____ <input type="checkbox"/> Other
Remarks	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 14-1138 for the above identified docket number.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Michael L. Goldman Nixon Peabody LLP Clinton Square, P.O. Box 31051 Rochester, New York 14603-1051 Telephone: (585) 263-1304 Fax: (585) 263-1600
Signature	 Registration No. 30,727
Date	July 20, 2003

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]	
I hereby certify that this correspondence is being:	
<input checked="" type="checkbox"/> deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop PCT, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450	
<input type="checkbox"/> transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at	
(703) 7/21/05 Date	 Signature Wendy L. Barry Typed or printed name



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov

U.S. APPLICATION NUMBER NO.	FIRST NAMED APPLICANT	ATTY. DOCKET NO.
10/519,370	Hartmut M Hanauske-Abel	57768/31

INTERNATIONAL APPLICATION NO.

PCT/US03/21178

LA. FILING DATE

PRIORITY DATE

07/02/2003

07/03/2002

Michael L Goldman
Nixon Peabody
Clinton Square
PO Box 31051
Rochester, NY 14603-1051

CONFIRMATION NO. 4789

371 FORMALITIES LETTER



OC000000016496672

Date Mailed: 07/14/2005

NOTIFICATION OF MISSING REQUIREMENTS UNDER 35 U.S.C. 371 IN THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US)

The following items have been submitted by the applicant or the IB to the United States Patent and Trademark Office as a Designated / Elected Office (37 CFR 1.495).

- Copy of the International Application filed on 12/22/2004
- Copy of the International Search Report filed on 12/22/2004
- Small Entity Statement filed on 12/22/2004
- Request for Immediate Examination filed on 12/22/2004
- U.S. Basic National Fees filed on 12/22/2004
- Priority Documents filed on 12/22/2004

The following items **MUST** be furnished within the period set forth below in order to complete the requirements for acceptance under 35 U.S.C. 371:

- Oath or declaration of the inventors, in compliance with 37 CFR 1.497(a) and (b), identifying the application by the International application number and international filing date.

ALL OF THE ITEMS SET FORTH ABOVE MUST BE SUBMITTED WITHIN TWO (2) MONTHS FROM THE DATE OF THIS NOTICE OR BY 32 MONTHS FROM THE PRIORITY DATE FOR THE APPLICATION, WHICHEVER IS LATER. FAILURE TO PROPERLY RESPOND WILL RESULT IN ABANDONMENT.

The time period set above may be extended by filing a petition and fee for extension of time under the provisions of 37 CFR 1.136(a).

Applicant is reminded that any communications to the United States Patent and Trademark Office must be mailed to the address given in the heading and include the U.S. application no. shown above (37 CFR 1.5)

*A copy of this notice **MUST** be returned with the response.*

DEBORAH D WILLIAMS

Telephone: (703) 308-9140 EXT 205

PART 1 - ATTORNEY/APPLICANT COPY

U.S. APPLICATION NUMBER NO.	INTERNATIONAL APPLICATION NO.	ATTY. DOCKET NO.
10/519,370	PCT/US03/21178	57768/31

FORM PCT/DO/EO/905 (371 Formalities Notice)

Component Fee Type	Total Owed	Total Paid	Balance Due
Application Filing Fee	300.	150.00	150.00
Search Fee	0.	250.00	0.00
Examination Fee	200.	100.00	100.00
Application Size Fee	0.	0.00	0.00
Independent Claims Fee	0.	0.00	0.00
Total Claims Fee	0.	0.00	0.00
Multiple Dependent Claims Surcharge	0.	0.00	0.00
Late Oath Surcharge	130.	65.00	0.00
Miscellaneous Payments	0.	0.00	0.00
Missing English Translation Surcharge	0.	0.00	0.00
Returned Check Surcharge	0.	0.00	0.00

Note: Information in this box reflects the current status of the component. NOT necessarily the status when the item below was received.

Item

Name Additional Application Filing Fees

Mailroom Receipt Date 07/25/2005

Effective Receipt Date 07/25/2005

Select problem(s) associated with this item

- Incorrect fee posting
- Search Fee Missing
- Search Fee Insufficient
- Exam Fee Missing
- Exam Fee Insufficient
- Application Size Fee Missing

OK Skip Refresh Hold Cancel Print Screen

Last Modification

D.P.